STATE OF SOUTH CAROLINA (Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doc's Limo	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET NUMBER:
(IV))) If this is your first time fiting an application with the PSC, you will no have a Docket Number. The Commission will assign one to you. If yo have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print) Submitted by: Kassandra Afoulon	Telephone: (843) 801 9560
Address: 151 Decatur dave Summer Ville St. 294X	Fax: (843) 449 8396
	Email: Katorylon 2000 6) 4600. Co
NOTE: The cover sheet and information contained herein neither repla as required by law. This form is required for use by the Public Service be filled out completely.	ces nor supplements the filing and service of pleadings or other paper. Commission of South Carolina for the purpose of docketing and mus
NATURE OF ACTIO	N (Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Application - Class C Charter Bus ECEIVED	Request to Amend Passenger Limit
Application - Class C Non-Emergency DEC 0 2021	Request
Application - Class C Stretcher Van PSC SC MAIL I DMS	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter
Request for Cancellation of Certificate	Response Return to Petition
Request for Suspension	Other:
Request for Reinstatement	L. Wilder

TO: +18038965199

P.

12/9/2021

2:10 PM

FROM: Staples

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

12/9/2021 2:10 PM FROM: Staples TO: +18038965199 P. 5

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY	Date: 12/3/2/
Application is hereby made for a Certificate of Public Coof S.C. Code Ann., § 58-23-10, et seq. (1976), and amen	onvenience and Necessity, in accordance with the provision dinents thereto.
1. Blossed M. Bard Trans Name under which business is to be conducted (corporation	Spor. for firm L.L.C. 1. partnership, or sole proprietorship, with or without trade name.)
151 De Catur Vive Surcei Add	mmer/11/0 SC 29486
Mailing Address of Applica	nt (if different from street address)
843)801956b	(843) 499 8396
Katoulon 201	il Address / ahoo. Com
 If the Applicant is an LLC or a corporation, a copy of the Secretary of State and the Articles of Incorporation must Carolina Secretary of State "Foreign Corporation" Certification 	be attached. (If incorporated outside of SC, attach South
3. Select Entity Type: (Check one)	
Individual Owner/Sole Proprietorship	
Partnership - List names and address of all perso	n having an interest in the business.
Corporation - List names and addresses of two pr	incipal officers.
Klassandra Houlo	<u>n</u>

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilitie</u>	<u>s:</u>
Value of Real Estate		Mortgage/Loan on Real Estate	1,560.00
Value of Motor Vehicles	5,000.00	Loans Owed on Motor Vehicles	0
Cash on Hand	200.00	Business/Other Loans Owed	0
Cash in Bank	2,500.00	Other Liabilities or Debts	0
Value of Other Assets and Equipment	500.00	Total Liabilities	1,560 06
Total Assets	10,500.06		

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles
 owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

.95 cents per miliage per passenger also open for negotiations

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

□ Abbeville	Cherokee	Florence	f.ee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
□ Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Hony	Newberry	York
Beaufort	Dillon	Jasper	Oconce	
Bcrkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

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DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seatbelts in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT	WHEEL- CHAIR LIFT
Toyota	2008 Sienn	5TDZK23CA852210:	72 4235	NO
	- 10			

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INSURANCE QUOTE

This form MUST BE COMPLETED.

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of currer insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTI

The following insurance quote is for:		
Kassand	ia Atoulon	
	Name of Applicant	
151 Decatur Dri	No Summer Ville	de 29486
	Address of Applicant	
Amount of Premium:		
112 22 0		
Liability Insurance \$ 10,320.00	.	
The above quoted premium is for a term of	months	
Minimum Limits - Bodily injury and prope		ess
than the following:		Limita Ouested
		Limits Quoted
Liability Combined Each Occurance	\$ 1,000,000	
Liability Combined Each Occurance Medical Payments per Person	\$ 1,000,000 \$ 1,000	1, 200,000 5,000
Medical Payments per Person	\$ 1,000	1,000,000
Medical Payments per Person	\$ 1,000	1,000,000
Medical Payments per Person		1,000,000
Medical Payments per Person National State N	\$ 1,000	1,000,000

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

Rassanda Atomon

1. Is there currently any outstanding judgments against the Applicant?

O Yes

(D) No

If Yes, list judgements here:

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

Ø Yes

O No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

O Yes

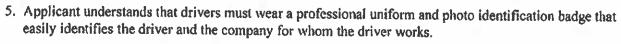
O No

2:10 PM

ACCEPTED FOR PROCESSING - 2021 December 10 8:58 AM - SCPSC - 2021-376-T - Page 8 of 11

Exhibit on Driver Qualifications

CPR (Certificate or its equivaler	ers must possess at least a current American Red Cross Standard First Aid and nt, and records that verify/record such training must be kept on file at the business within South Carolina.
%	Yes	No
2. Applic	ant understands that driv	ers must be in compliance with all OSHA regulations.
0	Yes	No
two-wa	ay radios, first-aid kits, fi	ers must be trained in the use of all vehicle installed safety equipment such as re extinguishers, and other equipment as outlined in PSC Regulations.
Ø	Yes O	No
4. Application with di	ant understands that drive sabilities, including whe	ers must be able to physically perform actions necessary to assist persons elchair users.
	Yes O	No



No

6. Applicant understands that drivers must complete twelve (12) hours of in-service training annually in the area of safety, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

O No

O No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

tiotowith.	
S.C. Code Ann. Section 58-3-250 states, in pa electronic service, registered or certified mail,	art, that every final order of the Commission must be served by upon the parties to the proceeding or their attorneys.
Please check the applicable box:	
through the Commission's eService System Ti	nmission orders related to the Applicant's authority in South Carolina the Applicant authorizes the Commission to serve its orders by using the e-Application. To sign up for eService notifications, please visit www.psc.sc.
The Applicant DOES NOT AGREE to receive Carolina through the Commission's eService Sy	future Commission orders related to the Applicant's authority in South ystem.
The Applicant for the Certificate of Public Con affirm that all statements contained in the above	invenience and Necessity as set forth in the foregoing, swear or ve application are true and correct.
	Applicant's Signature
	Title of Applicant (e.g. President, Owner, etc.)
ķī.	

STATE OF SOUTH CAROLINA COUNTY OF BEYKELL SWORN TO BEFORE ME day of Dellmyxx Notary Public Commission Expires Sept 19,2028

ERICA BROWN Notary Public - State of South Carolina My Commission Expires September 19, 2028

Print Application

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

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electronic service, registered or certified mail, upon	the parties to the proceeding or their attorneys.
through the Commission's eService System. 'The Appl	n orders related to the Applicant's authority in South Carolina licant authorizes the Commission to serve its orders by using the e- ion. To sign up for eService notifications, please visit www.psc.sc.
The Applicant DOES NOT AGREE to receive future Carolina through the Commission's eService System	Commission orders related to the Applicant's authority in South
The Applicant for the Certificate of Public Convenie affirm that all statements contained in the above app	ence and Necessity as set forth in the foregoing, swear or lication are true and correct.
_	Lassandra Howler Applicant's Signature
-	Title of Applicant (e.g. President, Owner, etc.)
county of Blykeley	
This 3 day of Delember, 2021	ERICA BROWN Notery Public - State of South Carolina My Commission Expires September 19, 2028
Notary Public	
Commission Expires Sept 19,2028	

Print Application

South Carolina Secretary of State

Business Entities Online

File, Search, and Retrieve Documents Electronically

Blessed On Board Transportation LLC

Corporate Information

Entity Type: Limited Liability Company

Status: Good Standing

Domestic/Foreign: Domestic

Incorporated State: South Carolina

Important Dates

Effective Date: 10/13/2021

Expiration Date: N/A

Term End Date: N/A

Dissolved Date: N/A

Registered Agent

Agent: Kassandra Atoulon

Address: 151 Decatur Dr.

Summerville, South Carolina 29486

Official Documents On File

Filing Type	Filing Date
Articles of Organization	10/13/2021

For filing questions please contact us at 803-734-2158

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